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## \*BIBDATASHEET\*

CONFIRMATION NO. 4610

Bib Data Sheet

|                             |                                       |              |                        |                                     |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>09/610,034 | FILING DATE<br>07/05/2000<br><br>RULE | CLASS<br>424 | GROUP ART UNIT<br>1645 | ATTORNEY DOCKET NO.<br>NIH142.001C1 |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|

## APPLICANTS

Xin-Xing Gu, College Park, MD; ✓ KSS

John B. Robbins, Chevy Chase, MD; ✓ KSS

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of PCT/US99/00590 01/12/1999 ✓ KSS  
which claims benefit of 60/071,483 01/13/1998 ✓ KSS

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/05/2000

|  |                           |                        |                       |                            |
|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no                               | STATE OR<br>COUNTRY<br>MD | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>38 | INDEPENDENT<br>CLAIMS<br>8 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <u>KSS</u> Initials <u>KSS</u>   |                           |                        |                       |                            |

## ADDRESS

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## TITLE

Lipooligosaccharide based vaccine for prevention of moraxella (branhamella)catarrhalis infections in humans

|                                    |   |  |
|------------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>1534 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |
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|--|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>09/610,034   | <b>FILING DATE</b><br>07/05/2000<br><b>RULE</b> -   | <b>CLASS</b><br>435           | <b>GROUP ART UNIT</b><br>1645   | <b>ATTORNEY DOCKET NO.</b><br>NIH142.001C1 |
| <b>APPLICANTS</b><br>Xin-Xing Gu, College Park, MD ;<br>John B. Robbins, Chevy Chase, MD ;<br><br><b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A CON OF PCT/US99/00590 01/12/1999<br>WHICH CLAIMS BENEFIT OF 60/071,483 01/13/1998<br><br><b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 09/05/2000</b>   |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and <i>Khabib Shahmansur</i><br>Acknowledged <i>KSS</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>MD | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>38                  |
|  |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>8             |
| <b>ADDRESS</b><br>Nancy W Vensko<br>Knobbe Martens Olson & Bear LLP<br>620 Newport Center Drive<br>Sixteenth Floor<br>Newport Beach ,CA 92660-8016   |   |                               |   |  |
| <b>TITLE</b><br>Lipooligosaccharide based vaccine for prevention of moraxella (branhamella)catarrhalis infections in humans  |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>1534   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |